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RIORD.004A

TECH CENTER 1600/2900

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Riordan, et al.  
Appl. No. : 09/579,327  
Filed : May 25, 2000  
For : IMMUNE-STIMULATING BACTERIAL CELL WALL EXTRACTS  
Examiner : Albert M. Navarro  
Group Art Unit : 1645

AMENDMENT

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action mailed September 25, 2003, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 6 of this paper.

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Docket No.: RIORD.004A

FEB 04 2004

Customer No.: 20,995

TECH CENTER 1600/2900

## AMENDMENT / RESPONSE TRANSMITTAL

Applicant : Riordan, et al.  
 App. No. : 09/579327  
 Filed : May 25, 2000  
 For : IMMUNE-STIMULATING  
 BACTERIAL CELL WALL  
 EXTRACTS  
 Examiner : Albert M. Navarro  
 Art Unit : 1645

## CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

January 26, 2004

(Date)

*Suzanne G. Jepson*  
 Suzanne G. Jepson, Reg. No. 51,848

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

- (X) Amendment in 11 pages.  
 (X) The present application qualifies for small entity status under 37 C.F.R. § 1.27.

The fee has been calculated as shown below:

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
Total Claims	30 - 33 =	2202 (\$9)	x 9 =	\$0
Independent Claims	3 - 3 = 0	2201 (\$43)	0 x 43 =	\$0
Multiple Claim		2203 (\$145)		\$
1 Month Extension		2251 (\$55)		\$55
2 Month Extension		2252 (\$210)		\$
3 Month Extension		2253 (\$475)		\$
			<b>TOTAL FEE DUE</b>	<b>\$55</b>


- (X) An extension of time is hereby requested by payment of the appropriate fee indicated above.  
 (X) A check in the amount of \$55 is enclosed.  
 (X) Return prepaid postcard.

01/30/2004 SDENR001 00000069 09579327

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- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.



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Suzanne G. Jepson  
Registration No. 51,848  
Agent of Record  
Customer No. 20,995  
(619) 235-8550